ENTRY BLANK	
PLEASE TYPE OR PRINT	Entered previous May Show
Ms. Mr. Artist JOHN CIAG	yes no
Will Mills	(Last Name Last)
Permanent Adress 11625 COUNTY AIN	IE ROAD-GATES MILLS
Street	City
44040 Tel. (216) 4	23-3192
Zip Area Code	
Temporary or Studio Address	
Street	City
Tel. ()	
Zip Area Code	
If you do not presently live in one of Western Reserve, which county were	
Collaborator(If Any)	
If May Show entries are not accepted. Artist will pick up at Museum. Museum should dispose of. Museum should ship to artist C.0	
Special Instructions When necessary include below instruction the object is to be assembled and dis LIGHT CAREFULLY - PREFIL PLAY OF WARM AND COLUMN TO THE LEVEL; 2	played. SRABLY WITH A
This entry blank must be fully made entry blanks will not be accepted.	out and signed. Unsigned
Note carefully calendar for delivery a understood that the Museum will hav its own account any objects not called	ve the right to dispose for
It is also understood that accepted of exhibition until August 21, 1977.	bjects will remain on
The submission of objects will be conconditions printed in the entry information. Signature	

ENTRY BLANKS

1	1 1. Paintings 1 4. Sculpture	☐ 2. Graph☐ 5. Electr	ics □ 3. Ph ic □ 6. Cra	otography ofts 4-2-19	
Materials			/		
STAINLESS STEEL + LAQUER					
Title 10W RELIE	F-ENVEL	OPE SERIES	#2		
Price or NFS Insurance Value if NFS Only H.28" W. 80"					
	GRAPHICS A	AND PHOTOGR	APHY ONLY		
Additional No. For Sale	Total	No. in Edition	Price Unframed	Price of Frame	
ACCEPTED	DO NOT W	RITE IN THI	S SECTION	ACCEPTED	
REJECTED				REJECTED	
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